

The assumption that methods of syphilis epidemiology will succeed for gonorrhea, a totally different disease, is tenuous at best.

Diseases of public health importance have never been controlled by treatment alone. Prevention of gonorrhea by a vaccine is not possible at least at present. Unless we can convince the populations at risk that this is a health hazard of sufficient import to warrant such preventive techniques as we do possess, abstinence, the condom and possibly chemical prophylaxis, separation of host and disease agent seems highly unlikely. I do not mean to deny the seriousness of gonorrhea; data from pre-antibiotic days amply demonstrate its potential. I am concerned that we are pretending to wisdom we do not have and to medical solutions that are totally inadequate for essentially social behavioral problems. Let's get our facts straight, our education on human sexuality realistic, and our programs prevention oriented.

MARY RIGGS, M.D.
*Assistant Health Officer
Santa Clara County Health Department
San Jose*

An Earthquake Under Grass

To the Editor: I thought it might be of interest to physicians to relate an experience of treating a patient who was intoxicated with marijuana during the February earthquake. He is a 21-year-old senior at the local state college who was being seen for a success phobia. He had made a trip south to the border that night and returned home about 5:00 a.m. He woke up his (male) roommate and they had a joint for breakfast. Both were "high" when the earthquake occurred at 6:00 a.m. My patient reported that he was totally paralyzed. He could do nothing but sit in the chair. He realized what was happening but could not move. He became acutely anxious which led to further immobility. His friend got to the door but could not get it open. Normally he had no difficulty with this task but because of his intoxication he could not unlock it.

I would like to make several comments. The most obvious one is can anyone not understand why we are having difficulty in Viet Nam. The services have only recently begun to admit mari-

juana use there when I have talked to ex-GI's coming back for "several years" who say that 90% of the troops have been regular users. How can we expect them to function in emergencies when they are paralyzed with this drug?

The marijuana users compare its effect with alcohol. Certainly a great amount of alcohol will cause such paralysis of action but it is usual in moderate alcohol intoxication for the person to "sober up" quickly when faced with an emergency. Soldiers for years have used alcohol to make them accomplish deeds of bravery.

We as physicians have led to some of this. LSD first came into use as a research drug to try to duplicate schizophrenic reactions. I believe our mistake was not recognizing early that we were not creating schizophrenic reactions or other exotic brain conditions that would "expand consciousness" but were causing acute and chronic brain syndromes. We had not seen delirium from the infectious diseases for a few years and had forgotten about it. Admittedly the delirium from marijuana is less severe on some occasions but can still cause hallucinations and usually causes other perceptual distortions especially time-space relationships. I feel organized medicine must take a strong stand to correctly diagnose these conditions and expedite careful research work to prove their functional brain disturbances and the hazards thereof.

JOHN C. SHIPPER
Sylmar

Progonasyl for VD Prophylaxis?

To the Editor: In an editorial, "Venereal Disease Epidemic" (August, 1971, Page 78), the author stated that an intravaginal proprietary preparation, progonasyl, could be used as a prophylactic agent. The regional office of the FDA advises that this preparation although "marketed for more than 40 years" is still an Investigational New Drug in terms of its venereal disease prophylactic properties.

Your readers might find it helpful if you qualified the status of other than fully approved drugs for the treatment indication described.

ERWIN H. BRAFF, M.D.
*Acting Chief
Division of Venereal Disease Control
San Francisco*